

AFFIDAVIT FOR RETIRED CPA/PA STATUS

I,				
COMPLETE THE FOLLOWING:				
1. I reached the age of 65 on		,		
MONTH		DAY	YEAR	
I wish to retire without being subject to CPE or renewal fees.				
2. I warrant and affirm that I have not MONTH DAY	nt and affirm that I have not performed the above services since: (Date must precede date of retirement) (DAY YEAR			
I further certify that I have read and understand the Law and Rules of the Board; including rule 0020-503(3)(f) which states that I must obtain 80 hours of technical CPE during the 24 month period preceding any request I should make to reactivate my license.				
Affiant Signature		Certif	ficate Number	Date
Street Address	City	State		Zip
Sworn and subscribed Before Me this	day of	 	, 20	
Notary signature				
Notary Public: My Commission Expires: _ IN 1324			(Seal)	